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"Heart Disease—America's Leading Cause of Death" and "Nutrition of Aged Cardiac Patients," plus Tip of the Month (Hemorrhage) and High Points of Cardiotrophin PMG

The following is a transcription of the September 1959 issue of Dr. Royal Lee's *Applied Trophology* newsletter, originally published by Standard Process Laboratories.

Heart Disease—America's Leading Cause of Death

The appalling prevalence of heart disease in this country is a most remarkable phenomenon. If a war caused the slaughter of 750,000 victims every year, we would be in a dither of an effort to win the fight, but a purely preventable deficiency disease can kill the same number of unsuspecting victims, and nobody gives it a second thought.

Dr. I. Snapper in his book *Chinese Lessons to Western Medicine* (Interscience, 1941) tells us, "Another point which must be specifically mentioned is the infrequency of arteriosclerosis in North China…It may be significant that the only diabetic Chinese patient with typical angina pectoris we saw during the last two years was an inveterate cigarette smoker…In China the hypertensive patients do not suffer from coronary thrombosis, as is observed so often in the Western part of the world."

During the Korean War, autopsies on American soldiers killed in battle showed 76 percent were afflicted with advanced coronary lesions. *None* of the native Korean troops showed this condition. Why? Our *refined food* deprived our boys of the fat-soluble vitamins, including the vitamin E complex, with its hormone precursors and its E2 factor. E2 has exactly the same effect on the coronary circulation as nitroglycerin: it relieves angina pectoris in the course of minutes and soon wipes out the disease, just as wheat germ wipes out beriberi or fresh tomatoes wipe out scurvy.

Doctor, are you checking your patients routinely for heart lesions that can be quickly remedied by deficiency correction? If not, you are asleep on the job; your patients and your own loved ones deserve better attention. By making a few simple nutritional tests, lives may be saved. How can you lose?

Here are a few things that can be routinely corrected.

1. Murmurs may indicate heart enlargement (athlete's heart), sometimes congenital, that we believe is due to valve leakage secondary to the distortion of structure from the enlargement. Natural vitamin B complex will promptly eliminate these murmurs, often within ten minutes of the chewing of the tablets by the patient. B complex restores the normal muscle tone and promotes the reestablishment of normal valvular position, thereby ending the valve leakage.

2. Skips, extra systoles, arrhythmias in general, and fibrillation are all phenomena that follow long periods of deficient nutrition. In particular, the use of foods such as refined sugar and bleached flour cause this deficiency, which we might call "beriberi in its American phase."

Natural vitamin B complex is the vitamin that promptly restores normal function where the cause is this deficiency—and it is in the vast majority of such patients. Actually, the deficient factor is B4, otherwise known as the "antiparalysis vitamin." Vitamin B4 cannot be separated from natural thiamine, even by "repeated recrystallization," indicating the futility of trying to make a synthetic imitation of the natural B complex factors.

Note that it follows that *no natural thiamine can be free of the antiparalysis factor, and no synthetic thiamine could possibly carry it*. Let the fellow who says "natural and synthetic vitamins are identical" explain this one.

The effect is also prompt, often observable within five minutes after the tablets are chewed with a drink of water. Let it be understood, however, that in case of fibrillation the patient is not cured by the vitamin. He has a badly damaged heart and must be made to realize that his condition is serious and needs the best skill that the doctor can give him. The fibrillation may disappear, but it will soon return. In his case Cardiotrophin may be much more important, since it promotes a rebuilding of heart tissue, for certainly such a patient will have developed natural tissue antibodies to his heart because of the long history of overload. The extra systoles, skipped beat, etc., are far less serious and will soon disappear under the B complex treatment.

3. The cause of a missing second sound in some area of the heart muscle is the lack of ionized calcium in the bloodstream, often due to overexposure to sun, with consequent excess of vitamin D in the blood. This causes retention of calcium and requires vitamin F to restore the level of ionized (diffusible) blood calcium—the only kind we can get into the muscle. We normally get our diffusible calcium from hard water, or it may be supplied with Calcium Lactate. It is *not* supplied by calcium phosphate (bone calcium). Recovery is prompt after the administration of vitamin F [as Cataplex F] and Calcium Lactate. Ten minutes is often time enough to see the restoration of the second sound.

Vitamin F is found only in *unrefined oils*. Commercial vegetable oils are usually made from rancid materials, which are then refined, bleached, and deodorized. In buying oils be sure you get fresh, cold-pressed products. They are scarce, and they are as perishable as fresh milk.

Normally, we get these vitamins only from the oils in raw nuts, fresh butter, fresh meats, fish, or freshly ground cereal products, such as bread made from fresh ground flour. All commercial cereal products either have had the oil-bearing germ removed or rancidity has developed, since the keeping quality of germ oils is a matter of days once the seed has been broken by any processing. For example, flaxseed oil remains sweet in the seed for ten years, but if reduced to a meal, it becomes rancid in twenty-four hours.

Vitamin F must be concentrated from selected sources to get this spectacular effect on heart muscle. The only test for any vitamin to be used for human nutrition is the *clinical test*—to show its effect on the human subject, which may be quite different from its effect on another species. (This fact is stressed by the following comment from the *Yearbook of the U.S. Department of Agriculture of 1939*, page 151: "We simply cannot apply to one species of animals conclusions derived from experiments on another…For specific information about the reaction of any particular species, it will be necessary to make an actual trial on the species in question.")

You will note here the reason why *clinical effects* must be your measure of effectiveness of a vitamin product—not tests or standardization on *animals*—for a product to be used for human nutrition.

4. An accentuated second sound over the pulmonary artery means, as a rule, pulmonary hypertension secondary to hypoadrenalism. The patient has a tight feeling in his chest on exertion. He has too little adrenaline in his blood, causing a constriction of the lung blood vessels and a relaxation of the vessels of the rest of the body. This patient has a subnormal blood pressure, as a rule, with the hypertension limited to the lung.

The remedy? Support the adrenals with natural vitamin C complex [Cataplex C]—*not* with ascorbic acid. Tyrosinase, or organic copper, is the factor required.

These patients often are easily fatigued, have no stamina, are too tired to get through the day without resting. The natural vitamin C often makes new persons out of them. They can discover a new life, a life without fatigue.

About ten percent of the population has this condition to some degree. You can build a practice helping them, and they will never forget what you have done for them.

5. For the victim of a coronary occlusion (commonly referred to as "heart attack"), we suggest a schedule of the natural G complex [Cataplex G] to relax his coronary arteries. Then watch him get back to normal health. He may need some E2 if accompanied by angina pains.

We've offered here only a few suggestions, to arouse interest in the great possibilities of routinely observing the heart sounds. Any doctor who treats suffering humanity should not overlook the importance of listening to heart sounds through a stethoscope.

If the doctor is at all aggressive in his desire to fight disease on all fronts, he will find the Endocardiograph indispensable, for it amplifies and records the heart sounds and permits the keeping of records that show the constantly improving health status of his heart patients. Since the leading cause of death in this country is heart disease due to malnutrition, here is a field particularly appropriate for attention by the doctor who leans to the philosophy of helping patients by removing the obstacles to health instead of using drugs and surgery to enable the victim of disease to continue to defy the facts of life. We have no quarrel with drugs and surgery, since they necessarily have a definite place in therapeutics, but we don't believe they have a place where used on victims of simple starvation.

It is our carefully considered opinion after thirty years of observation that ninety-five percent of the heart patients can be so helped by a properly designed schedule of essential food factors that they will live long enough to die of some cause having no relation to their cardiovascular system.

Doctor, it is the biggest mistake of your life if you fail to check *every* patient for possible deficiencies that are undermining his health and are scheduling him for one of those statistical deaths of 750,000 per year from "heart disease." You are failing to provide the service that your patients have a right to expect from you.

Reference

1. Stepp, Kuhnau, and Schroeder. *The Vitamins and Their Clinical Applications*, p. 24, 1936.

Nutrition of Aged Cardiac Patients

From "Medical Literature Abstracts," *JAMA*, pp. 708–709, February 25, 1956:

"The majority of aged cardiac patients who are seen in clinics or offices are in a deplorable nutritional state. The various cardiac drugs, such as digitalis and mercurials, reduce the desire for food. Many of these patients cannot take fruit juices, milk, iron, or vitamins because these items violently disagree with them. They live on very little and, to stimulate the appetite, take coffee or alcohol. Many are constipated and take laxatives regularly. Consequently, most of these patients are starving themselves. The patient should be instructed never to eat when nervous or fatigued. The surroundings must be made pleasant; harsh noises and all disturbances should be avoided at the table. Foods such as sweetbreads, liver, brains, or tripe should be incorporated in the diet. Adjunctive dietary factors, such as calcium, iron, and vitamins, are also necessary."

—Monat, H.A., *Geriatrics*, 10:581–582, December 1955 (Minneapolis)

Tip of the Month (Hemorrhage)

To stop bleeding in a victim of hereditary hemophilia or in sporadic hemorrhage, the chewing of two Chlorophyll Perles and swallowing of two more immediately after that will in most instances rapidly stop the bleeding. Where blood calcium is deficient, Calcium Lactate may also be necessary to check the hemorrhage.

Pneumotrophin remains our standby control in the usual types of hemorrhage, and we use Ovex specifically for uterine bleeding.

High Points of Standard Process Nutritional Adjuncts

Cardiotrophin: This is the cytotrophic extract of heart (bovine) containing the heart protomorphogen, developed with the thought of rebuilding and increasing the tonicity and elasticity of the heart muscle.

Cardiotrophin is to be used as a heart tonic following the usual indicated vitamin therapy. One Cardiotrophin tablet is equivalent in effect to the consumption of two to four ounces of fresh beef heart.

Cardiotrophin also helps to control blood sugar, probably by activating the absorption of sugar from the blood by the muscle cell. Inositol is synergistic in this action.

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Selene River Press is a publishing company specializing in holistic nutrition education. Our philosophy is rooted in the work of Dr. Royal Lee, who showed that vitamin deficiencies, due to processed foods, are responsible for most degenerative disease. From organic farming to food-based vitamins, from raw milk to fermented foods, Dr. Lee set the course for the field of whole food nutrition.

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